

- **Agreement for Long Term Collaboration** (ALTC) between St Helens and Knowsley Hospitals NHS Trust and Southport and Ormskirk Hospital NHS Trust
- **Shaping Care Together (SCT) Update**
- **CQC Update** (Unannounced Inspection in March 2021)

Agreement for Long Term Collaboration

**St Helens and Knowsley Hospitals NHS Trust
Southport and Ormskirk Hospital NHS Trust
NHS England/Improvement**

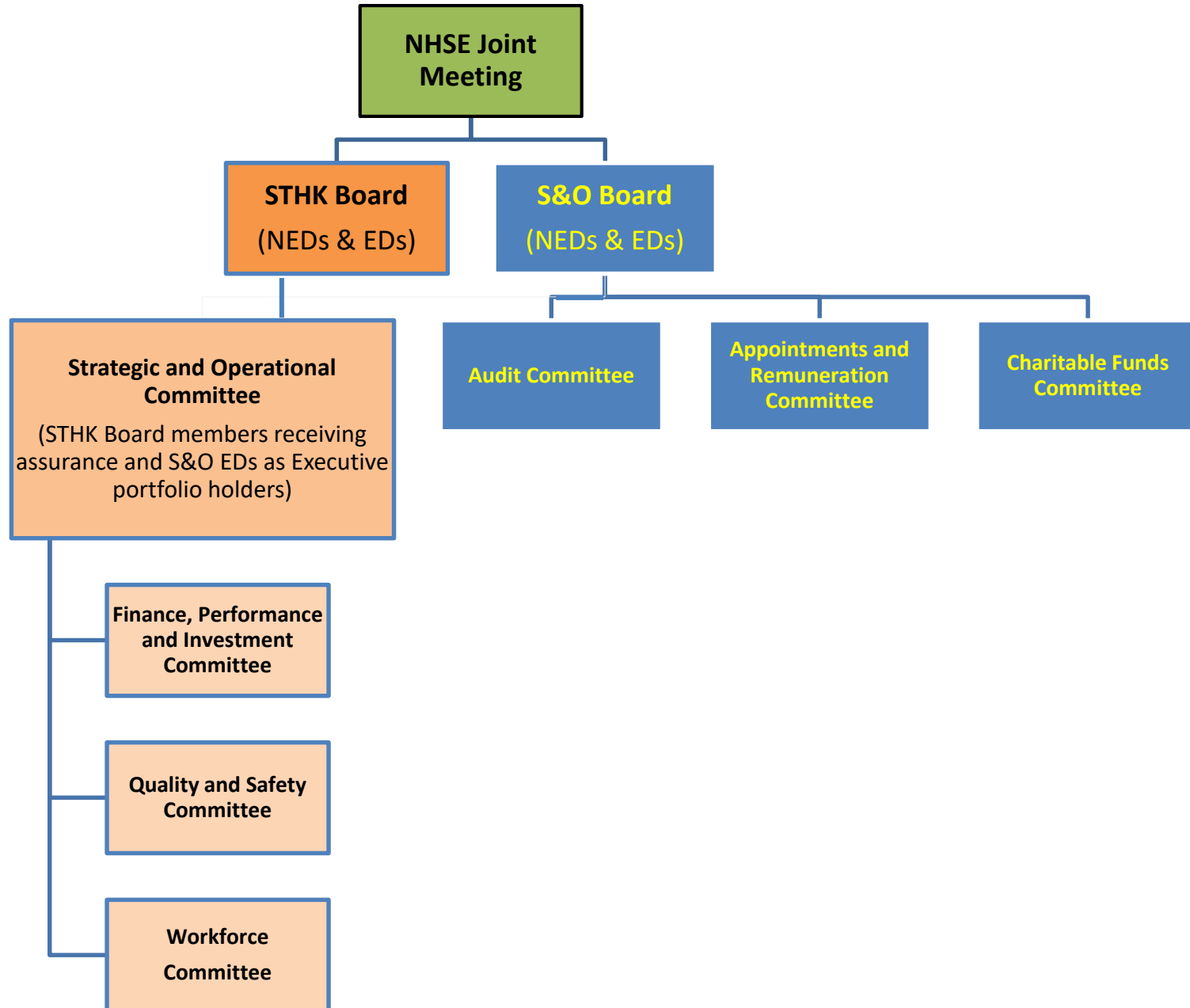
Key points of the ALTC (1)

- Everything that can be delegated by the S&O Board has been delegated to STHK.
- The S&O Board will retain the statutory functions – audit, management of charitable funds, Board level appointments and remuneration, and continue to meet four times a year to discharge these responsibilities.
- S&O Board have appointed Ann Marr as CEO and Anne-Marie Stretch as the Managing Director.

Key points of the ALTC (2)

- The Governance of S&O will be undertaken by the Strategy and Operations Committee;
 - STHK Non-Executive Directors
 - STHK Executive Directors
 - S&O Executive Directors
- The effectiveness of the ALTC will be overseen by a joint meeting with representatives of NHSE, STHK and S&O.

Governance of the ALTC



Priorities

- Immediate task is to develop plans for the fragile services at S&O
 - Haematology, Pain Management, Dermatology, Older People Services (Geriatricians), Anaesthetics, Radiology, General Medicine, Head & Neck, Stroke, Community Paediatrics, Dietetic services, Ophthalmology and Acute Medicine.
- Assess other clinical and corporate / support services to ensure they are sufficiently resilient to support the delivery of high quality clinical care.
- Review capital requirements with regard to backlog maintenance, productivity and service alignment.
- Position statement to the first joint meeting with NHSE/I in December.

Shaping Care Together (SCT)

Shaping Care Together

- Strategic programme to ‘futureproof’ NHS services across Southport, Formby and West Lancashire.
- Ensuring better care for patients and using our finance, staff, and buildings to maximum effect.
- Preparing the local NHS to meet the challenges of the future – both those we know about and those that cannot be foreseen.
- Delivering high-quality services that are affordable, efficient and, above all, safe.
- Collaborative & deliberative. Led by CCGs in partnership and engaging widely.

Shaping Care Together

- **Engagement**
- Over 2k survey responses and 24 focus groups with the public.
- Healthwatch and Sefton CVS engaged and Engagement Process Advisory Group established.
- Health Inequalities Impact Assessment and Equalities Impact Assessment drafted.
- Continue engagement to further develop options.
- **Clinical & Care Strategy in Development**
- **Case for Change Developed**
- Clinical, workforce, travel, estates, digital, activity and finance.
- Test out transport impact analysis with Sefton Council (booked 19.10.21).
- Options development and appraisal in line with the public and staff engagement and the clinical & care strategy development.

CQC Update

CQC Unannounced Inspection – March 2021

- CQC unannounced responsive inspection on 3rd March 2021. CQC published the inspection report on 13th May 2021.
- During this inspection, the Trust was inspected but not rated. The unannounced focused inspection was undertaken following information of concern received from the public.
- The inspection focussed on the Medical Care core service which included medical wards and departments.
- No breaches of regulation were identified. 7 actions the CQC recommend the Trust should take.

Key Findings

- Patients are treated with compassion and kindness and their privacy and dignity is respected, and takes account of their individual needs.
- Safety incidents are investigated and any resulting actions implemented and monitored, and lessons learned are appropriately shared.
- Staff say they feel respected, supported and valued and can raise concerns without fear.
- Leaders have the skills and abilities to run the service, and patients and staff think they are approachable.
- Outstanding practice identified (individualised) patient centred care on the Oasis Ward (end of life).

Areas for Improvement

- Continue to improve the review of patient risk assessments.
- Continue to improve the involvement of patients and their families in decisions regarding care and treatment where DNACPR is considered.
- Continue towards electronic patient records to promote accuracy of holistic record keeping.
- continue to improve discharge arrangements to ensure safe patient discharge.
- continue to act to address the high number of registered and unregistered nursing vacancies.
- continue to improve the assessment of the nutrition and hydration needs of patients including the accurate completion of fluid and nutrition charts.
- The Trust should continue to address the number of medical staffing vacancies across the medical care service.

Progress & Improvements

- New actions have been incorporated into our existing Quality Improvement Plan (QIP), they are also reflected in our 10 Quality Priorities for 2021/22.
- All actions in QIP are Green and have timescales and trajectories to close by January 2022.
- Monitoring will continue through existing governance processes such as Ward Accreditation, Perfect Ward Audits, Senior Clinical Walk Arouns and Peer Review.
- Continue to meet with CQC colleagues through regular engagement meetings.

Questions?